

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. SHO-0036	
		First Inventor Hideaki Imura	
		Title	GAMING MACHINE
		Express Mail Label No.	
APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>		ADDRESS TO: MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small>		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
3. <input checked="" type="checkbox"/> Specification [Total Pages 17] <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none">- Descriptive title of the invention- Cross Reference to Related Applications- Statement Regarding Fed sponsored R & D- Reference to sequence listing, a table, or a computer program listing appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure		8. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> <ul style="list-style-type: none">a. <input type="checkbox"/> Computer Readable Form (CRF)b. Specification Sequence Listing on:<ul style="list-style-type: none">i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); orii. <input type="checkbox"/> Paperc. <input type="checkbox"/> Statements verifying identity of above copies	
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 15]			
5. Oath or Declaration [Total Sheets 3] <ul style="list-style-type: none">a. <input checked="" type="checkbox"/> unexecuted (original or copy)b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small><ul style="list-style-type: none">i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small>		ACCOMPANYING APPLICATION PARTS	
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76			
9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))			
10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small>			
11. <input type="checkbox"/> English Translation Document (if applicable)			
12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations			
13. <input type="checkbox"/> Preliminary Amendment			
14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small>			
15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small>			
16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). <small>Applicant must attach form PTO/SB/35 or its equivalent.</small>			
17. <input type="checkbox"/> Other: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>			
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: <div style="display: flex; justify-content: space-between; align-items: flex-start;"><div><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP)</div><div>of prior application No.: _____</div></div> <div style="display: flex; justify-content: space-between; align-items: flex-start; margin-top: 5px;"><div>Prior application information: Examiner _____</div><div>Art Unit: _____</div></div> <p>For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>			
19. CORRESPONDENCE ADDRESS			
<input checked="" type="checkbox"/> Customer Number: 23353 OR <input type="checkbox"/> Correspondence address below			
Name		RADER, FISHMAN & GRAUER PLLC	
Address		1233 20th Street, N.W. Suite 501	
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Fax		(202) 955-3751	
Name (Print/Type)		Robert S. Green	
Registration No. (Attorney/Agent)		41,800	
Signature			
Date		October 31, 2003	



FEE TRANSMITTAL for FY 2004				Complete if Known	
<i>Effective 10/01/2003, Patent fees are subject to annual revision.</i>				Application Number	Not Yet Assigned
				Filing Date	Concurrently Herewith
				First Named Inventor	Hideaki Imura
				Examiner Name	Not Yet Assigned
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27				Art Unit	N/A
TOTAL AMOUNT OF PAYMENT		(\$) 770.00		Attorney Docket No.	SHO-0036

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)																																																																																																																																																																																	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: <div style="border: 1px solid black; padding: 2px; margin: 5px 0;">18-0013</div> <div style="border: 1px solid black; padding: 2px; margin: 5px 0;">Rader, Fishman & Grauer PLLC</div> <p>The Director is authorized to: (check all that apply)</p> <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	3. ADDITIONAL FEES <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge – late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge – late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for <i>ex parte</i> reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>1252</td><td>420</td><td>2252</td><td>210</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1253</td><td>950</td><td>2253</td><td>475</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1254</td><td>1,480</td><td>2254</td><td>740</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1255</td><td>2,010</td><td>2255</td><td>1,005</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>1401</td><td>330</td><td>2401</td><td>165</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402</td><td>330</td><td>2402</td><td>165</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td>290</td><td>2403</td><td>145</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive – unavoidable</td><td></td></tr> <tr><td>1453</td><td>1,330</td><td>2453</td><td>665</td><td>Petition to revive - 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unintentional		1501	1,330	2501	665	Utility issue fee (or reissue)		1502	480	2502	240	Design issue fee		1503	640	2503	320	Plant issue fee		1460	130	1460	130	Petitions to the Commissioner		1807	50	1807	50	Processing fee under 37 CFR 1.17(q)		1806	180	1806	180	Submission of Information Disclosure Stmt		8021	40	8021	40	Recording each patent assignment per property (times number of properties)		1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))		1810	770	2810	385	For each additional invention to be examined (37CFR 1.129(b))		1801	770	2801	385	Request for Continued Examination (RCE)		1802	900	1802	900	Request for expedited examination of a design application	
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FEE CALCULATION			
1. BASIC FILING FEE			
Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1001	770	2001	385
1002	340	2002	170
1003	530	2003	265
1004	770	2004	385
1005	160	2005	80
		Utility filing fee	770.00
		Design filing fee	
		Plant filing fee	
		Reissue filing fee	
		Provisional filing fee	
		SUBTOTAL (1)	(\$) 770.00
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE			
		Extra Claims	Fee from below
Total Claims	8	-20** =	0.00
Independent Claims	3	-3** =	0.00
Multiple Dependent			
		Fee Description	Fee Paid
Large Entity	Small Entity		
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1202	18	2202	9
1201	86	2201	43
1203	290	2203	145
1204	86	2204	43
1205	18	2205	9
		Claims in excess of 20	
		Independent claims in excess of 3	
		Multiple dependent claim, if not paid	
		** Reissue independent claims over original patent	
		** Reissue claims in excess of 20 and over original patent	
		SUBTOTAL (2)	(\$) 0.00
**or number previously paid, if greater; For Reissues, see above			

SUBMITTED BY		(Complete if applicable)	
Name (Print/Type)	Robert S. Green	Registration No. (Attorney/Agent)	41,800
Signature		Telephone	(202) 955-3750
		Date	October 31, 2003